



State of North Carolina
Department of Health and Human Services
Division of Facility Services

Non-Transport Vehicle Inspection Report

Date: _____

Location: _____



Office of Emergency Medical Services
2707 Mail Service Center
Raleigh, NC 27699-2707

PROVIDER INFORMATION

Provider Name: _____ Provider #: _____

System Affiliation: _____ EMS System _____ Model _____ System Name: _____

VEHICLE INFORMATION

Current Permit #: _____ Vin #: _____ Year: _____ Make: _____

Vehicle Type: _____ 2 X 4 _____ 4 X 4 _____ Assigned Vehicle Number: _____ Fuel Type: _____ Gas _____ Diesel _____

Proposed Operational Level: _____ EMT-Intermediate _____ EMT-Paramedic _____ Purpose of Inspection: _____ Permitting _____ Compliance _____

PERMITTING INSPECTION

Non-Transport Vehicle Inspection Section A: Mandatory Items

☐ Vehicle Body & Function
☐ Emergency Lighting System
☐ Emergency Siren
☐ Two-Way Radio
☐ Portable O2 Cylinder
☐ O2 Regulator w/ adult & Pedi Mask
☐ Portable suction device w/ tubing
☐ Adult BV w/mask & tubing
☐ Pedi BV w/ child & Infant mask plus tubing
☐ Adult BP Cuff

Missing any items in section A results in
Summary Suspension or refusal of permit

Section B: Five Point Deduction Items

☐ Exterior Cleanliness
☐ Mounted Fire Extinguisher
☐ Flashlight w/ extra batteries
☐ Adult & Pedi size C-collars
☐ Adult Spinal Extrication device
☐ Pedi Immobilization device
☐ Adult Femur Traction Splint
☐ Splints (Upper & Lower)
☐ Interior Cleanliness
☐ OPA's (Adult & Pedi size)
☐ Adult Nasal Cannula
☐ Adult & Pedi Soft Suction catheter
☐ Rigid Suction device
☐ Sterile Saline Solution
☐ Adult Stethoscope
☐ Child BP Cuff
☐ Infant BP Cuff
☐ Sterile OB Kit
☐ Masks
☐ Eye Protection
☐ Jump Suit / gown
☐ Shoe Covers
☐ Disinfecting Hand Wash
☐ Disposable Bio Trash Bags
☐ Sharps Container
☐ Non-Sterile Gloves
☐ Latex Free Equip. or Latex Free Kit
☐ Burn Kit
☐ Cold Pack
☐ Broselow Tape

Section C: One Point Deduction Items

☐ Provider Name Displayed on each side
☐ Reflective on all sides
☐ Equipment Secured
☐ Blanket
☐ Occlusive Dressing
☐ Dressing
☐ Bandages
☐ Roll Gauze
☐ Heavy Duty Scissors
☐ Tape
☐ Alcohol Wipes
☐ Lubricating Jelly
☐ NPA
☐ Bulb Syringe
☐ Triage Tags
☐ Emesis Basin

EMT-I Inspection

(In addition to section A,B & C)

Section D: Mandatory Items

☐ ET Blades (Adult & Pedi)
☐ ET Handles w/ extra batteries
☐ Adult ET tubes
☐ Pedi ET tubes (2.5 – 6.5mm)
☐ ET Tube stylette
☐ ET placement device
☐ Alternative airway device
☐ IV administration drip set
☐ IV catheters
☐ External Defibrillator

EMT-I Model Requirements

☐ Cellular phone
☐ Pulse Oximeter
☐ Non-steroidal anti-inflammatory
☐ Supplies in date / temp controlled

Section E: Fifteen Point Deduction Items

☐ Albuterol
☐ Aspirin
☐ Crystalloid solution
☐ Diphenhydramine
☐ Epinephrine

Section E Continued:

☐ Glucagon
☐ Glucose solution
☐ Narcotic antagonist
☐ Nasal spray decongestant
☐ Nitroglycerin
☐ Nebulizer
☐ IV arm board
☐ IV start kit
☐ Magill forceps
☐ Glucose measurement

EMT-I Scoring

Section B: _____ X 5pts = _____

Section C: _____ X 1pts = _____

Section E: _____ X 15pts = _____

Total Score: _____

Less than 33 points = Satisfactory

Greater than 33 points = Unsatisfactory

Section A, D or greater than 83 points =
Summary Suspension or refusal of
permit

☐ Deficiencies corrected during
Inspection

Inspection Results

☐ Approved ☐ Not Approved

EMT-P Inspection

(in addition to A,B,C,D & E)

Section F: Mandatory Items

☐ Monitor / Defib / Pacer
☐ Monitor Acces. (Ad & Pedi)
☐ Pediatric IO

EMT-P Model Requirements

☐ Monitor w/ 12-lead
☐ Adult & Pedi nasogastric tubes
☐ Hypothermic thermometer
☐ Anti-emetic
☐ Beta blocker/Calcium Ch. Blocker
☐ Phenothiazine
☐ Magnesium Sulfate
☐ Steroid preparation

Section G: Fifteen Point Deduction Items

☐ Adenosine
☐ Amiodarone or Lidocaine
☐ Atropine
☐ Benzodiazepine
☐ Calcium Ch / Gluconate
☐ Dopamine
☐ Furosemide
☐ Narcotic analgesic
☐ Sodium Bicarb.

EMT-P Scoring

Section B: _____ X 5pts = _____

Section C: _____ X 1pts = _____

Section E & G: _____ X 15pts = _____

Total Score: _____

Less than 33 points = Satisfactory

Greater than 33 points = Unsatisfactory
Section A, D, F or Greater than 83
points = Summary Suspension or refusal
of permit

☐ Deficiencies corrected during
Inspection

Inspection Results

Pass:

☐ EMT-I ☐ EMT-P

Permit #: _____

Expiration: _____

Failed:

☐ Refusal of Permit

☐ Failed – Temporary

☐ Failed - Summary Suspension

Comments: _____

Compliance Inspection:

Type: ☐ Ramp ☐ Spot ☐ Provider Audit

Personnel: _____ Level: _____

#1: _____

Inspector: _____